

July 15, 2002

Corres. and Mail

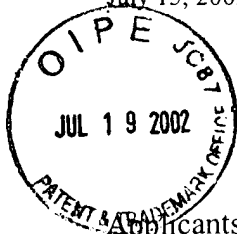
BOX AF

PATENT APPLICATION

DOCKET NO. 0725.1056-001

Expedited Procedure under 37 C.F.R. 1.16

Examining Group 1645



IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

Applicants:

James M. Hogle, Harmon J. Zuccola, David Filman and Carl Elk

Application No.:

09/347,175

Group Art Unit:

1645

Filed:

July 1, 1999

Examiner:

R. Zeman

For:

OLIGOMERIZATION OF HEPATITIS DELTA ANTIGEN

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CERTIFICATE OF MAILING

I hereby certify that this correspondence is being deposited with the United States Postal Service with sufficient postage as First Class Mail in an envelope addressed to Assistant Commissioner for Patents, P.O. Box 2327, Arlington, VA 22202

on July 15, 2002 Judy Breen  
Date Signature

Judy Breen  
Typed or printed name of person signing certificate

Assistant Commissioner for Patents

P.O. Box 2327

Arlington, VA 22202

Sir:

Transmitted herewith is An Amendment After Final for filing in the above-identified application.

[ ] Small entity status of this application under 37 C.F.R. 1.9 and 1.27 has been established by a Small Entity Statement previously submitted.

[ ] A Small Entity Statement to establish small entity status under 37 C.F.R. 1.9 and 1.27 is enclosed.

The fee has been calculated as shown below:

	(COL. 1)		(COL. 2)	(COL. 3)
	CLAIMS REMAINING AFTER AMENDMENT		HIGHEST NO. PREVIOUSLY PAID FOR	PRESENT EXTRA
TOTAL	57	MINUS	* 57	0
INDEP	13	MINUS	** 13	0
FIRST PRESENTATION OF MULTIPLE DEP. CLAIM				

\* not fewer than 20

\*\* not fewer than 3

SMALL ENTITY

	RATE	ADDIT. FEE
X	\$ 9	\$
X	\$42	\$
+	\$140	\$

TOTAL = \$ 0

OTHER THAN  
SMALL ENTITY

	RATE	ADDIT. FEE
X	\$18	\$ 0
X	\$84	\$ 0
+	\$280	\$

TOTAL = \$ 0

Please charge Deposit Account No. 08-0380 for the following fees:

<input type="checkbox"/>	Petition for [            ] month Extension of Time	\$ _____
<input type="checkbox"/>	Amendment Fee	\$ _____
<input type="checkbox"/>	Other Fees:	
	_____	\$ _____
	_____	\$ _____
	TOTAL:	\$ <u>0</u>

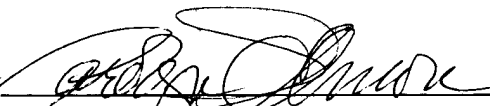
A check is enclosed in payment of the following fees:

<input type="checkbox"/>	Petition for [            ] month Extension of Time	\$ _____
<input type="checkbox"/>	Amendment Fee	\$ _____
<input type="checkbox"/>	Other Fees:	
	_____	\$ _____
	_____	\$ _____
	TOTAL:	\$ <u>0</u>

[X] A general authorization is hereby granted to charge Deposit Account No. 08-0380 for any fees required under 37 C.F.R. 1.16 and 1.17 in order to maintain pendency of this application. A copy of this authorization is enclosed for accounting purposes.

Respectfully submitted,

HAMILTON, BROOK, SMITH & REYNOLDS, P.C.

By  \_\_\_\_\_  
Carolyn S. Elmore  
Registration No.: 37,567  
Telephone (978) 341-0036  
Facsimile (978) 341-0136

Concord, Massachusetts 01742-9133

Dated: 7/15/02